

## Rep. Maura Hirschauer

## Filed: 3/31/2022

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following grounds:

(1) (Blank).

## 10200HB1464ham001 LRB102 03480 AMQ 38375 a 1 AMENDMENT TO HOUSE BILL 1464 2 AMENDMENT NO. . Amend House Bill 1464 by replacing everything after the enacting clause with the following: 3 "Section 5. The Medical Practice Act of 1987 is amended by 4 5 changing Sections 22 as follows: 6 (225 ILCS 60/22) (from Ch. 111, par. 4400-22) 7 (Section scheduled to be repealed on January 1, 2027) Sec. 22. Disciplinary action. 8 Department may revoke, suspend, place 9 probation, reprimand, refuse to issue or renew, or take any 10 11 disciplinary or non-disciplinary action as other the 12 Department may deem proper with regard to the license or

permit of any person issued under this Act, including imposing

fines not to exceed \$10,000 for each violation, upon any of the

1 (2) (Blank).

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- (3) A plea of guilty or nolo contendere, finding of guilt, jury verdict, or entry of judgment or sentencing, including, but not limited to, convictions, preceding sentences of supervision, conditional discharge, or first offender probation, under the laws of any jurisdiction of the United States of any crime that is a felony.
  - (4) Gross negligence in practice under this Act.
- (5) Engaging in dishonorable, unethical, or unprofessional conduct of a character likely to deceive, defraud or harm the public.
- (6) Obtaining any fee by fraud, deceit, or misrepresentation.
- (7) Habitual or excessive use or abuse of drugs defined in law as controlled substances, of alcohol, or of any other substances which results in the inability to practice with reasonable judgment, skill, or safety.
- (8) Practicing under a false or, except as provided by law, an assumed name.
- (9) Fraud or misrepresentation in applying for, or procuring, a license under this Act or in connection with applying for renewal of a license under this Act.
- (10) Making a false or misleading statement regarding their skill or the efficacy or value of the medicine, treatment, or remedy prescribed by them at their direction in the treatment of any disease or other condition of the

1 body or mind.

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- (11) Allowing another person or organization to use their license, procured under this Act, to practice.
- (12) Adverse action taken by another state or jurisdiction against a license or other authorization to practice as a medical doctor, doctor of osteopathy, doctor of osteopathic medicine or doctor of chiropractic, a certified copy of the record of the action taken by the other state or jurisdiction being prima facie evidence thereof. This includes any adverse action taken by a State or federal agency that prohibits a medical doctor, doctor of osteopathy, doctor of osteopathic medicine, or doctor of chiropractic from providing services to the agency's participants.
- (13) Violation of any provision of this Act or of the Medical Practice Act prior to the repeal of that Act, or violation of the rules, or a final administrative action of the Secretary, after consideration of the recommendation of the Medical Board.
- (14) Violation of the prohibition against fee splitting in Section 22.2 of this Act.
- (15) A finding by the Medical Board that the registrant after having his or her license placed on probationary status or subjected to conditions or restrictions violated the terms of the probation or failed to comply with such terms or conditions.

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- 1 (16) Abandonment of a patient.
  - (17) Prescribing, selling, administering, distributing, giving, or self-administering any drug classified as a controlled substance (designated product) or narcotic for other than medically accepted therapeutic purposes.
    - (18) Promotion of the sale of drugs, devices, appliances, or goods provided for a patient in such manner as to exploit the patient for financial gain of the physician.
    - (19) Offering, undertaking, or agreeing to cure or treat disease by a secret method, procedure, treatment, or medicine, or the treating, operating, or prescribing for any human condition by a method, means, or procedure which the licensee refuses to divulge upon demand of the Department.
    - (20) Immoral conduct in the commission of any act including, but not limited to, commission of an act of sexual misconduct related to the licensee's practice.
    - (21) Willfully making or filing false records or reports in his or her practice as a physician, including, but not limited to, false records to support claims against the medical assistance program of the Department of Healthcare and Family Services (formerly Department of Public Aid) under the Illinois Public Aid Code.
      - (22) Willful omission to file or record, or willfully

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impeding the filing or recording, or inducing another person to omit to file or record, medical reports as required by law, or willfully failing to report an instance of suspected abuse or neglect as required by law.

- (23) Being named as a perpetrator in an indicated report by the Department of Children and Family Services under the Abused and Neglected Child Reporting Act, and upon proof by clear and convincing evidence that the licensee has caused a child to be an abused child or neglected child as defined in the Abused and Neglected Child Reporting Act.
- (24) Solicitation of professional patronage by any corporation, agents or persons, or profiting from those representing themselves to be agents of the licensee.
- (25) Gross and willful and continued overcharging for professional services, including filing false statements for collection of fees for which services are not rendered, including, but not limited to, filing such false statements for collection of monies for services not rendered from the medical assistance program of the Department of Healthcare and Family Services (formerly Department of Public Aid) under the Illinois Public Aid Code.
- (26) A pattern of practice or other behavior which demonstrates incapacity or incompetence to practice under this Act.

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2	inability	to	practice	under	this	Act	with	reas	onak	ole
3	iudament,	skil	l, or safe	etv.						

- (28) Physical illness, including, but not limited to, deterioration through the aging process, or loss of motor skill which results in a physician's inability to practice under this Act with reasonable judgment, skill, or safety.
- (29) Cheating on or <u>attempting</u> attempt to subvert the licensing examinations administered under this Act.
- (30) Willfully or negligently violating the confidentiality between physician and patient except as required by law.
- (31) The use of any false, fraudulent, or deceptive statement in any document connected with practice under this Act.
- (32) Aiding and abetting an individual not licensed under this Act in the practice of a profession licensed under this Act.
- (33) Violating state or federal laws or regulations relating to controlled substances, legend drugs, or ephedra as defined in the Ephedra Prohibition Act.
- (34) Failure to report to the Department any adverse final action taken against them by another licensing jurisdiction (any other state or any territory of the United States or any foreign state or country), by any peer review body, by any health care institution, by any

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professional society or association related to practice under this Act, by any governmental agency, by any law enforcement agency, or by any court for acts or conduct similar to acts or conduct which would constitute grounds for action as defined in this Section.

- (35) Failure to report to the Department surrender of a license or authorization to practice as a medical doctor, a doctor of osteopathy, a doctor of osteopathic medicine, or doctor of chiropractic in another state or jurisdiction, or surrender of membership on any medical staff or in any medical or professional association or society, while under disciplinary investigation by any of those authorities or bodies, for acts or conduct similar to acts or conduct which would constitute grounds for action as defined in this Section.
- (36) Failure to report to the Department any adverse judgment, settlement, or award arising from a liability claim related to acts or conduct similar to acts or conduct which would constitute grounds for action as defined in this Section.
- (37) Failure to provide copies of medical records as required by law.
- (38) Failure to furnish the Department, its investigators or representatives, relevant information, legally requested by the Department after consultation with the Chief Medical Coordinator or the Deputy Medical

Coordinator.

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- 2 (39) Violating the Health Care Worker Self-Referral 3 Act.
  - (40) Willful failure to provide notice when notice is required under the Parental Notice of Abortion Act of 1995.
    - (41) Failure to establish and maintain records of patient care and treatment as required by this law.
    - (42) Entering into an excessive number of written collaborative agreements with licensed advanced practice registered nurses resulting in an inability to adequately collaborate.
    - (43) Repeated failure to adequately collaborate with a licensed advanced practice registered nurse.
    - (44) Violating the Compassionate Use of Medical Cannabis Program Act.
    - (45) Entering into an excessive number of written collaborative agreements with licensed prescribing psychologists resulting in an inability to adequately collaborate.
    - (46) Repeated failure to adequately collaborate with a licensed prescribing psychologist.
    - (47) Willfully failing to report an instance of suspected abuse, neglect, financial exploitation, or self-neglect of an eligible adult as defined in and required by the Adult Protective Services Act.

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- (48) Being named as an abuser in a verified report by the Department on Aging under the Adult Protective Services Act, and upon proof by clear and convincing evidence that the licensee abused, neglected, or financially exploited an eligible adult as defined in the Adult Protective Services Act.
- (49) Entering into an excessive number of written collaborative agreements with licensed physician assistants resulting in an inability to adequately collaborate.
- (50) Repeated failure to adequately collaborate with a physician assistant.

Except for actions involving the ground numbered (26), all proceedings to suspend, revoke, place on probationary status, or take any other disciplinary action as the Department may deem proper, with regard to a license on any of the foregoing grounds, must be commenced within 5 years next after receipt by the Department of a complaint alleging the commission of or notice of the conviction order for any of the acts described herein. Except for the grounds numbered (8), (9), (26), and (29), no action shall be commenced more than 10 years after the date of the incident or act alleged to have violated this Section. For actions involving the ground numbered (26), a pattern of practice or other behavior includes all incidents alleged to be part of the pattern of practice or other behavior that occurred, or a report pursuant to Section 23 of this Act

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received, within the 10-year period preceding the filing of the complaint. In the event of the settlement of any claim or cause of action in favor of the claimant or the reduction to final judgment of any civil action in favor of the plaintiff, such claim, cause of action, or civil action being grounded on the allegation that a person licensed under this Act was negligent in providing care, the Department shall have an additional period of 2 years from the date of notification to the Department under Section 23 of this Act of such settlement or final judgment in which to investigate and commence formal disciplinary proceedings under Section 36 of this Act, except as otherwise provided by law. The time during which the holder of the license was outside the State of Illinois shall not be included within any period of time limiting the commencement of disciplinary action by the Department.

The entry of an order or judgment by any circuit court establishing that any person holding a license under this Act is a person in need of mental treatment operates as a suspension of that license. That person may resume his or her practice only upon the entry of a Departmental order based upon a finding by the Medical Board that the person has been determined to be recovered from mental illness by the court and upon the Medical Board's recommendation that the person be permitted to resume his or her practice.

The Department may refuse to issue or take disciplinary action concerning the license of any person who fails to file a

- 1 return, or to pay the tax, penalty, or interest shown in a
- filed return, or to pay any final assessment of tax, penalty, 2
- 3 or interest, as required by any tax Act administered by the
- 4 Illinois Department of Revenue, until such time as
- 5 requirements of any such tax Act are satisfied as determined
- by the Illinois Department of Revenue. 6
- The Department, upon the recommendation of the Medical 7
- 8 Board, shall adopt rules which set forth standards to be used
- 9 in determining:
- 10 when a person will be deemed sufficiently (a)
- rehabilitated to warrant the public trust; 11
- (b) what constitutes dishonorable, unethical, or 12
- 13 unprofessional conduct of a character likely to deceive,
- 14 defraud, or harm the public;
- 15 (c) what constitutes immoral conduct in the commission
- 16 of any act, including, but not limited to, commission of
- an act of sexual misconduct related to the licensee's 17
- practice; and 18
- 19 (d) what constitutes gross negligence in the practice
- 20 of medicine.
- However, no such rule shall be admissible into evidence in 2.1
- 22 any civil action except for review of a licensing or other
- 23 disciplinary action under this Act.
- 24 In enforcing this Section, the Medical Board, upon a
- 25 showing of a possible violation, may compel any individual who
- 26 is licensed to practice under this Act or holds a permit to

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practice under this Act, or any individual who has applied for licensure or a permit pursuant to this Act, to submit to a mental or physical examination and evaluation, or both, which may include a substance abuse or sexual offender evaluation, as required by the Medical Board and at the expense of the Department. The Medical Board shall specifically designate the examining physician licensed to practice medicine in all of its branches or, if applicable, the multidisciplinary team involved in providing the mental or physical examination and evaluation, or both. The multidisciplinary team shall be led by a physician licensed to practice medicine in all of its branches and may consist of one or more or a combination of physicians licensed to practice medicine in all of its branches, licensed chiropractic physicians, licensed clinical psychologists, licensed clinical social workers, licensed clinical professional counselors, and other professional and administrative staff. Any examining physician or member of the multidisciplinary team may require any person ordered to submit to an examination and evaluation pursuant to this Section to submit to any additional supplemental testing deemed necessary to complete any examination or evaluation process, including, but not limited to, blood testing, urinalysis, psychological testing, or neuropsychological testing. The Medical Board or the Department may order the examining physician or any member of the multidisciplinary team to provide to the Department or the Medical Board any and

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all records, including business records, that relate to the examination and evaluation, including any supplemental testing performed. The Medical Board or the Department may order the examining physician or any member of the multidisciplinary team to present testimony concerning this examination and evaluation of the licensee, permit holder, or applicant, including testimony concerning any supplemental testing or documents relating to the examination and evaluation. No information, report, record, or other documents in any way related to the examination and evaluation shall be excluded by reason of any common law or statutory privilege relating to licensee, permit holder, communication between the applicant and the examining physician or any member of the multidisciplinary team. No authorization is necessary from the licensee, permit holder, or applicant ordered to undergo an evaluation and examination for the examining physician or any member of the multidisciplinary team to provide information, reports, records, or other documents or to provide testimony regarding the examination and evaluation. The individual to be examined may have, at his or her own expense, another physician of his or her choice present during all aspects of the examination. Failure of any individual to submit to mental or physical examination and evaluation, or both, when directed, shall result in an automatic suspension, without hearing, until such time as the individual submits to the examination. If the Medical Board finds a physician unable

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to practice following an examination and evaluation because of the reasons set forth in this Section, the Medical Board shall require such physician to submit to care, counseling, or treatment by physicians, or other health care professionals, approved or designated by the Medical Board, as a condition for issued, continued, reinstated, or renewed licensure to practice. Any physician, whose license was granted pursuant to Sections 9, 17, or 19 of this Act, or, continued, reinstated, renewed, disciplined or supervised, subject to such terms, conditions, or restrictions who shall fail to comply with such terms, conditions, or restrictions, or to complete a required program of care, counseling, or treatment, as determined by the Chief Medical Coordinator or Deputy Medical Coordinators, shall be referred to the Secretary for a determination as to whether the licensee shall have his or her license suspended immediately, pending a hearing by the Medical Board. In instances in which the Secretary immediately suspends a license under this Section, a hearing upon such person's license must be convened by the Medical Board within 15 days after such suspension and completed without appreciable delay. The Medical Board shall have the authority to review the subject physician's record of treatment and counseling impairment, to the extent regarding the permitted applicable federal statutes and regulations safeguarding the confidentiality of medical records.

An individual licensed under this Act, affected under this

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1 Section, shall be afforded an opportunity to demonstrate to the Medical Board that he or she can resume practice in 2 3 compliance with acceptable and prevailing standards under the 4 provisions of his or her license.

The Department may promulgate rules for the imposition of fines in disciplinary cases, not to exceed \$10,000 for each violation of this Act. Fines may be imposed in conjunction with other forms of disciplinary action, but shall not be the exclusive disposition of any disciplinary action arising out of conduct resulting in death or injury to a patient. Any funds collected from such fines shall be deposited in the Illinois State Medical Disciplinary Fund.

All fines imposed under this Section shall be paid within 60 days after the effective date of the order imposing the fine or in accordance with the terms set forth in the order imposing the fine.

(B) The Department shall revoke the license or permit issued under this Act to practice medicine or a chiropractic physician who has been convicted a second time of committing any felony under the Illinois Controlled Substances Act or the Methamphetamine Control and Community Protection Act, or who has been convicted a second time of committing a Class 1 felony under Sections 8A-3 and 8A-6 of the Illinois Public Aid Code. A person whose license or permit is revoked under this subsection B shall be prohibited from practicing medicine or treating human ailments without the use of drugs and without

operative surgery. 1

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- (C) The Department shall not revoke, suspend, place on probation, reprimand, refuse to issue or renew, or take any other disciplinary or non-disciplinary action against the license or permit issued under this Act to practice medicine to a physician:
  - (1) based solely upon the recommendation of physician to an eligible patient regarding, prescription for, or treatment with, an investigational drug, biological product, or device; or
  - (2) for experimental treatment for Lyme disease or other tick-borne diseases, including, but not limited to, prescription of or treatment with long-term antibiotics; or-
  - (3) based solely upon the license of a physician being revoked or disciplined by any state or territory for the provision of, authorization of, or participation in any health care, medical service, or procedure related to an abortion on the basis that such health care, medical service, or procedure related to an abortion is unlawful or prohibited in that state or territory, if the provision of, authorization of, or participation in that health care, medical service, or procedure related to an abortion is not unlawful or prohibited in this State.
  - (D) The Medical Board shall recommend to the Department civil penalties and any other appropriate discipline in

- 1 disciplinary cases when the Medical Board finds that a
- 2 physician willfully performed an abortion with actual
- 3 knowledge that the person upon whom the abortion has been
- 4 performed is a minor or an incompetent person without notice
- 5 as required under the Parental Notice of Abortion Act of 1995.
- 6 Upon the Medical Board's recommendation, the Department shall
- 7 impose, for the first violation, a civil penalty of \$1,000 and
- 8 for a second or subsequent violation, a civil penalty of
- 9 \$5,000.
- 10 (Source: P.A. 101-13, eff. 6-12-19; 101-81, eff. 7-12-19;
- 11 101-363, eff. 8-9-19; 102-20, eff. 1-1-22; 102-558, eff.
- 12 8-20-21; revised 12-2-21.)
- 13 Section 10. The Nurse Practice Act is amended by changing
- 14 Section 70-5 as follows:
- 15 (225 ILCS 65/70-5) (was 225 ILCS 65/10-45)
- 16 (Section scheduled to be repealed on January 1, 2028)
- 17 Sec. 70-5. Grounds for disciplinary action.
- 18 (a) The Department may refuse to issue or to renew, or may
- 19 revoke, suspend, place on probation, reprimand, or take other
- 20 disciplinary or non-disciplinary action as the Department may
- deem appropriate, including fines not to exceed \$10,000 per
- violation, with regard to a license for any one or combination
- 23 of the causes set forth in subsection (b) below. All fines
- 24 collected under this Section shall be deposited in the Nursing

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- 1 Dedicated and Professional Fund.
  - (b) Grounds for disciplinary action include the following:
- 3 (1) Material deception in furnishing information to the Department.
  - (2) Material violations of any provision of this Act or violation of the rules of or final administrative action of the Secretary, after consideration of the recommendation of the Board.
  - (3) Conviction by plea of guilty or nolo contendere, finding of guilt, jury verdict, or entry of judgment or by sentencing of any crime, including, but not limited to, convictions, preceding sentences of supervision, conditional discharge, or first offender probation, under the laws of any jurisdiction of the United States: (i) that is a felony; or (ii) that is a misdemeanor, an essential element of which is dishonesty, or that is directly related to the practice of the profession.
  - (4) A pattern of practice or other behavior which demonstrates incapacity or incompetency to practice under this Act.
  - (5) Knowingly aiding or assisting another person in violating any provision of this Act or rules.
  - (6) Failing, within 90 days, to provide a response to a request for information in response to a written request made by the Department by certified or registered mail or by email to the email address of record.

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- (7) Engaging in dishonorable, unethical unprofessional conduct of a character likely to deceive, defraud or harm the public, as defined by rule.
  - (8) Unlawful taking, theft, selling, distributing, or manufacturing of any drug, narcotic, or prescription device.
  - (9) Habitual or excessive use or addiction to alcohol, narcotics, stimulants, or any other chemical agent or drug that could result in a licensee's inability to practice with reasonable judgment, skill or safety.
  - Discipline by another U.S. jurisdiction or (10)foreign nation, if at least one of the grounds for the discipline is the same or substantially equivalent to those set forth in this Section.
  - (11) A finding that the licensee, after having her or his license placed on probationary status or subject to conditions or restrictions, has violated the terms of probation or failed to comply with such terms conditions.
  - (12) Being named as a perpetrator in an indicated report by the Department of Children and Family Services and under the Abused and Neglected Child Reporting Act, and upon proof by clear and convincing evidence that the licensee has caused a child to be an abused child or neglected child as defined in the Abused and Neglected Child Reporting Act.

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(13)	Wi	llful	omis	sion	to	file o	or	reco	ord,	or	willfu	lly
impeding	g t	he fi	ling	or	rec	cording	g (	or	indu	cing	ganot	her
person	to	omit	to	file	or	reco	rd	med	lical	re	ports	as
required	d bv	law.										

- (13.5) Willfully failing to report an instance of suspected child abuse or neglect as required by the Abused and Neglected Child Reporting Act.
- (14) Gross negligence in the practice of practical, professional, or advanced practice registered nursing.
- (15) Holding oneself out to be practicing nursing under any name other than one's own.
- (16) Failure of a licensee to report to the Department any adverse final action taken against him or her by another licensing jurisdiction of the United States or any foreign state or country, any peer review body, any health care institution, any professional or nursing society or association, any governmental agency, any law enforcement agency, or any court or a nursing liability claim related to acts or conduct similar to acts or conduct that would constitute grounds for action as defined in this Section.
- (17) Failure of a licensee to report to the Department surrender by the licensee of a license or authorization to practice nursing or advanced practice registered nursing in another state or jurisdiction or current surrender by the licensee of membership on any nursing staff or in any nursing or advanced practice registered nursing or

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- professional association society while or under disciplinary investigation by any of those authorities or bodies for acts or conduct similar to acts or conduct that would constitute grounds for action as defined by this Section.
  - (18) Failing, within 60 days, to provide information in response to a written request made by the Department.
  - (19) Failure to establish and maintain records of patient care and treatment as required by law.
  - (20) Fraud, deceit or misrepresentation in applying for or procuring a license under this Act or in connection with applying for renewal of a license under this Act.
  - (21) Allowing another person or organization to use the licensee's license to deceive the public.
  - (22) Willfully making or filing false records or reports in the licensee's practice, including but not limited to false records to support claims against the medical assistance program of the Department of Healthcare and Family Services (formerly Department of Public Aid) under the Illinois Public Aid Code.
  - (23) Attempting to subvert or cheat on a licensing examination administered under this Act.
  - (24) Immoral conduct in the commission of an act, including, but not limited to, sexual abuse, sexual misconduct, or sexual exploitation, related to licensee's practice.

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- 1 (25)Willfully or negligently violating the confidentiality between nurse and patient except as 2 3 required by law.
  - (26) Practicing under a false or assumed name, except as provided by law.
  - (27) The use of any false, fraudulent, or deceptive statement in any document connected with the licensee's practice.
  - (28) Directly or indirectly giving to or receiving from a person, firm, corporation, partnership, association a fee, commission, rebate, or other form of compensation for professional services not actually or personally rendered. Nothing in this paragraph (28) affects any bona fide independent contractor or employment arrangements among health care professionals, facilities, health care providers, or other entities, except as otherwise prohibited by law. Any employment arrangements may include provisions for compensation, health insurance, pension, or other employment benefits for the provision of services within the scope of the licensee's practice under this Act. Nothing in this paragraph (28) shall be construed to require an employment arrangement to receive professional fees for services rendered.
  - (29) A violation of the Health Care Worker Self-Referral Act.

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1	(30) Physical illness, mental illness, or disability
2	that results in the inability to practice the profession
3	with reasonable judgment, skill, or safety.

- (31) Exceeding the terms of a collaborative agreement or the prescriptive authority delegated to a licensee by his or her collaborating physician or podiatric physician in quidelines established under a written collaborative agreement.
- (32) Making a false or misleading statement regarding a licensee's skill or the efficacy or value of the medicine, treatment, or remedy prescribed by him or her in the course of treatment.
- selling, administering, (33)Prescribing, distributing, giving, or self-administering a classified as a controlled substance (designated product) or narcotic for other than medically accepted therapeutic purposes.
- (34) Promotion of the sale of drugs, devices, appliances, or goods provided for a patient in a manner to exploit the patient for financial gain.
- (35) Violating State or federal laws, rules, or regulations relating to controlled substances.
- (36)Willfully or negligently violating the confidentiality between an advanced practice registered nurse, collaborating physician, dentist, or podiatric physician and a patient, except as required by law.

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- 1 (37) Willfully failing to report an instance of suspected abuse, neglect, financial exploitation, or self-neglect of an eligible adult as defined in and required by the Adult Protective Services Act.
  - (38) Being named as an abuser in a verified report by the Department on Aging and under the Adult Protective Services Act, and upon proof by clear and convincing evidence that the licensee abused, neglected, financially exploited an eligible adult as defined in the Adult Protective Services Act.
  - (39) A violation of any provision of this Act or any rules adopted under this Act.
  - (40) Violating the Compassionate Use of Medical Cannabis Program Act.
  - (b-5) The Department shall not revoke, suspend, place on prohibition, reprimand, refuse to issue or renew, or take any other disciplinary or non-disciplinary action against the license or permit issued under this Act to practice as a registered nurse or an advanced practice registered nurse based solely upon the license of a registered nurse or an advanced practice registered nurse being revoked or disciplined by any state or territory for the provision of, authorization of, or participation in any health care, medical service, or procedure related to an abortion on the basis that such health care, medical service, or procedure related to an abortion is unlawful or prohibited in that state or territory,

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- if the provision of, authorization of, or participation in
  that health care, medical service, or procedure related to an
  abortion is not unlawful or prohibited in this State.
  - (c) The determination by a circuit court that a licensee is subject to involuntary admission or judicial admission as provided in the Mental Health and Developmental Disabilities Code, as amended, operates as an automatic suspension. The suspension will end only upon a finding by a court that the patient is no longer subject to involuntary admission or judicial admission and issues an order so finding and discharging the patient; and upon the recommendation of the Board to the Secretary that the licensee be allowed to resume his or her practice.
  - (d) The Department may refuse to issue or may suspend or otherwise discipline the license of any person who fails to file a return, or to pay the tax, penalty or interest shown in a filed return, or to pay any final assessment of the tax, penalty, or interest as required by any tax Act administered by the Department of Revenue, until such time as the requirements of any such tax Act are satisfied.
  - (e) In enforcing this Act, the Department, upon a showing of a possible violation, may compel an individual licensed to practice under this Act or who has applied for licensure under this Act, to submit to a mental or physical examination, or both, as required by and at the expense of the Department. The Department may order the examining physician to present

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testimony concerning the mental or physical examination of the licensee or applicant. No information shall be excluded by reason of any common law or statutory privilege relating to communications between the licensee or applicant and the examining physician. The examining physicians shall specifically designated by the Department. The individual to be examined may have, at his or her own expense, another physician of his or her choice present during all aspects of this examination. Failure of an individual to submit to a mental or physical examination, when directed, shall result in an automatic suspension without hearing.

substance-related violations shall All mandate an automatic substance abuse assessment. Failure to submit to an assessment by a licensed physician who is certified as an addictionist or an advanced practice registered nurse with specialty certification in addictions may be grounds for an automatic suspension, as defined by rule.

If the Department finds an individual unable to practice or unfit for duty because of the reasons set forth in this subsection (e), the Department may require that individual to submit to a substance abuse evaluation or treatment by individuals or programs approved or designated by a condition, term, or Department, as restriction for continued, restored, or renewed licensure to practice; or, in lieu of evaluation or treatment, the Department may file, or the Board may recommend to the Department to file, a complaint

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1 to immediately suspend, revoke, or otherwise discipline the license of the individual. An individual whose license was 2 granted, continued, restored, renewed, disciplined 3 4 supervised subject to such terms, conditions, or restrictions, 5 and who fails to comply with such terms, conditions, or restrictions, shall be referred to the Secretary for a 6 determination as to whether the individual shall have his or 7 her license suspended immediately, pending a hearing by the 8 9 Department.

In instances in which the Secretary immediately suspends a person's license under this subsection (e), a hearing on that person's license must be convened by the Department within 15 days after the suspension and completed without appreciable delay. The Department and Board shall have the authority to review the subject individual's record of treatment and counseling regarding the impairment to the extent permitted by applicable federal statutes and regulations safeguarding the confidentiality of medical records.

An individual licensed under this Act and affected under this subsection (e) shall be afforded an opportunity to demonstrate to the Department that he or she can resume practice in compliance with nursing standards under the provisions of his or her license.

24 (Source: P.A. 101-363, eff. 8-9-19; 102-558, eff. 8-20-21.)

Section 15. The Physician Assistant Practice Act of 1987

- is amended by changing Section 21 as follows: 1
- 2 (225 ILCS 95/21) (from Ch. 111, par. 4621)
- 3 (Section scheduled to be repealed on January 1, 2028)
- Sec. 21. Grounds for disciplinary action. 4
- (a) The Department may refuse to issue or to renew, or may 5
- revoke, suspend, place on probation, reprimand, or take other 6
- disciplinary or non-disciplinary action with regard to any 7
- license issued under this Act as the Department may deem 8
- 9 proper, including the issuance of fines not to exceed \$10,000
- 10 for each violation, for any one or combination of the
- 11 following causes:
- 12 (1) Material misstatement in furnishing information to
- 13 the Department.
- 14 (2) Violations of this Act, or the rules adopted under
- this Act. 15
- (3) Conviction by plea of guilty or nolo contendere, 16
- finding of guilt, jury verdict, or entry of judgment or 17
- 18 sentencing, including, but not limited to, convictions,
- 19 preceding sentences of supervision, conditional discharge,
- or first offender probation, under the laws of any 20
- 21 jurisdiction of the United States that is: (i) a felony;
- 22 or (ii) a misdemeanor, an essential element of which is
- dishonesty, or that is directly related to the practice of 23
- 24 the profession.
- 25 (4) Making any misrepresentation for the purpose of

1 obtaining licenses.

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- (5) Professional incompetence.
- (6) Aiding or assisting another person in violating any provision of this Act or its rules.
  - (7) Failing, within 60 days, to provide information in response to a written request made by the Department.
  - (8) Engaging in dishonorable, unethical, or unprofessional conduct, as defined by rule, of a character likely to deceive, defraud, or harm the public.
  - (9) Habitual or excessive use or addiction to alcohol, narcotics, stimulants, or any other chemical agent or drug that results in a physician assistant's inability to practice with reasonable judgment, skill, or safety.
  - (10) Discipline by another U.S. jurisdiction or foreign nation, if at least one of the grounds for discipline is the same or substantially equivalent to those set forth in this Section.
  - (11) Directly or indirectly giving to or receiving from any person, firm, corporation, partnership, or association any fee, commission, rebate or other form of compensation for any professional services not actually or personally rendered. Nothing in this paragraph (11) affects any bona fide independent contractor or employment arrangements, which may include provisions for compensation, health insurance, pension, or other employment benefits, with persons or entities authorized

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- 1 under this Act for the provision of services within the scope of the licensee's practice under this Act. 2
  - (12) A finding by the Disciplinary Board that the licensee, after having his or her license placed on probationary status has violated the terms of probation.
    - (13) Abandonment of a patient.
  - (14) Willfully making or filing false records or reports in his or her practice, including but not limited to false records filed with state agencies or departments.
  - (15) Willfully failing to report an instance of suspected child abuse or neglect as required by the Abused and Neglected Child Reporting Act.
  - (16) Physical illness, or mental illness or impairment that results in the inability to practice the profession with reasonable judgment, skill, or safety, including, but not limited to, deterioration through the aging process or loss of motor skill.
  - (17) Being named as a perpetrator in an indicated report by the Department of Children and Family Services under the Abused and Neglected Child Reporting Act, and upon proof by clear and convincing evidence that the licensee has caused a child to be an abused child or neglected child as defined in the Abused and Neglected Child Reporting Act.
    - (18) (Blank).
    - (19) Gross negligence resulting in permanent injury or

death of a patient. 1

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- (20) Employment of fraud, deception or any unlawful 2 3 means in applying for or securing a license as a physician 4 assistant.
  - (21) Exceeding the authority delegated to him or her by his or her collaborating physician in a written collaborative agreement.
  - (22) Immoral conduct in the commission of any act, such as sexual abuse, sexual misconduct, or sexual exploitation related to the licensee's practice.
- (23) Violation of the Health Care Worker Self-Referral 11 12 Act.
  - (24) Practicing under a false or assumed name, except as provided by law.
  - (25) Making a false or misleading statement regarding his or her skill or the efficacy or value of the medicine, treatment, or remedy prescribed by him or her in the course of treatment.
  - (26) Allowing another person to use his or her license to practice.
  - (27)Prescribing, selling, administering, distributing, giving, or self-administering a classified as a controlled substance for other than medically accepted therapeutic purposes.
  - (28) Promotion of the sale of drugs, devices, appliances, or goods provided for a patient in a manner to

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- 1 exploit the patient for financial gain.
  - (29) A pattern of practice or other behavior that demonstrates incapacity or incompetence to practice under this Act.
    - (30) Violating State or federal laws or regulations relating to controlled substances or other legend drugs or ephedra as defined in the Ephedra Prohibition Act.
    - (31) Exceeding the prescriptive authority delegated by the collaborating physician or violating the written collaborative agreement delegating that authority.
    - (32) Practicing without providing to the Department a notice of collaboration or delegation of prescriptive authority.
    - (33) Failure to establish and maintain records of patient care and treatment as required by law.
    - (34) Attempting to subvert or cheat on the examination of the National Commission on Certification of Physician Assistants or its successor agency.
    - (35)Willfully or negligently violating the confidentiality between physician assistant and patient, except as required by law.
    - (36) Willfully failing to report an instance of suspected abuse, neglect, financial exploitation, self-neglect of an eligible adult as defined in and required by the Adult Protective Services Act.
      - (37) Being named as an abuser in a verified report by

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the Department on Aging under the Adult Protective Services Act and upon proof by clear and convincing evidence that the licensee abused, neglected, or financially exploited an eligible adult as defined in the Adult Protective Services Act.

- (38) Failure to report to the Department an adverse final action taken against him or her by another licensing jurisdiction of the United States or a foreign state or country, a peer review body, a health care institution, a professional society or association, a governmental agency, a law enforcement agency, or a court acts or conduct similar to acts or conduct that would constitute grounds for action under this Section.
- (39) Failure to provide copies of records of patient care or treatment, except as required by law.
- (40) Entering into an excessive number of written collaborative agreements with licensed physicians resulting in an inability to adequately collaborate.
- 19 (41) Repeated failure to adequately collaborate with a collaborating physician.
  - (42) Violating the Compassionate Use of Medical Cannabis Program Act.
  - (b) The Department may, without a hearing, refuse to issue or renew or may suspend the license of any person who fails to file a return, or to pay the tax, penalty or interest shown in a filed return, or to pay any final assessment of the tax,

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1 penalty, or interest as required by any tax Act administered

by the Illinois Department of Revenue, until such time as the 2

3 requirements of any such tax Act are satisfied.

- (b-5) The Department shall not revoke, suspend, place on prohibition, reprimand, refuse to issue or renew, or take any other disciplinary or non-disciplinary action against the license or permit issued under this Act to practice as a physician assistant based solely upon the license of a physician assistant being revoked or disciplined by any state or territory for the provision of, authorization of, or participation in any health care, medical service, or procedure related to an abortion on the basis that such health care, medical service, or procedure related to an abortion is unlawful or prohibited in that state or territory, if the provision of, authorization of, or participation in that health care, medical service, or procedure related to an abortion is not unlawful or prohibited in this State.
- (c) The determination by a circuit court that a licensee is subject to involuntary admission or judicial admission as provided in the Mental Health and Developmental Disabilities Code operates as an automatic suspension. The suspension will end only upon a finding by a court that the patient is no longer subject to involuntary admission or judicial admission and issues an order so finding and discharging the patient, and upon the recommendation of the Disciplinary Board to the Secretary that the licensee be allowed to resume his or her

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(d) In enforcing this Section, the Department upon a showing of a possible violation may compel an individual licensed to practice under this Act, or who has applied for licensure under this Act, to submit to a mental or physical examination, or both, which may include a substance abuse or sexual offender evaluation, as required by and at the expense of the Department.

The Department shall specifically designate the examining physician licensed to practice medicine in all of its branches or, if applicable, the multidisciplinary team involved in providing the mental or physical examination or both. The multidisciplinary team shall be led by a physician licensed to practice medicine in all of its branches and may consist of one or more or a combination of physicians licensed to practice medicine in all of its branches, licensed clinical psychologists, licensed clinical social workers, clinical professional counselors, and other professional and administrative staff. Any examining physician or member of the multidisciplinary team may require any person ordered to submit to an examination pursuant to this Section to submit to any additional supplemental testing deemed necessary to complete any examination or evaluation process, including, but not limited to, blood testing, urinalysis, psychological testing, or neuropsychological testing.

The Department may order the examining physician or any

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1 member of the multidisciplinary team to provide to the

Department any and all records, including business records, 2

that relate to the examination and evaluation, including any

4 supplemental testing performed.

> The Department may order the examining physician or any member of the multidisciplinary team to present testimony concerning the mental or physical examination of the licensee applicant. No information, report, record, or other documents in any way related to the examination shall be excluded by reason of any common law or statutory privilege relating to communications between the licensee or applicant examining the physician or anv member multidisciplinary team. No authorization is necessary from the licensee or applicant ordered to undergo an examination for the examining physician or any member of the multidisciplinary team to provide information, reports, records, or other documents or to provide any testimony regarding examination and evaluation.

> The individual to be examined may have, at his or her own expense, another physician of his or her choice present during all aspects of this examination. However, that physician shall be present only to observe and may not interfere in any way with the examination.

> Failure of an individual to submit to a mental or physical examination, when ordered, shall result in an automatic suspension of his or her license until the individual submits

1 to the examination.

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If the Department finds an individual unable to practice because of the reasons set forth in this Section, the Department may require that individual to submit to care, counseling, or treatment by physicians approved or designated by the Department, as a condition, term, or restriction for continued, reinstated, or renewed licensure to practice; or, in lieu of care, counseling, or treatment, the Department may file a complaint to immediately suspend, revoke, or otherwise discipline the license of the individual. An individual whose license granted, continued, reinstated, was renewed, disciplined, or supervised subject to such terms, conditions, or restrictions, and who fails to comply with such terms, conditions, or restrictions, shall be referred to Secretary for a determination as to whether the individual shall have his or her license suspended immediately, pending a hearing by the Department.

In instances in which the Secretary immediately suspends a person's license under this Section, a hearing on that person's license must be convened by the Department within 30 days after the suspension and completed without appreciable delay. The Department shall have the authority to review the subject individual's record of treatment and counseling regarding the impairment to the extent permitted by applicable federal statutes and regulations safeguarding the confidentiality of medical records.

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An individual licensed under this Act and affected under this Section shall be afforded an opportunity to demonstrate to the Department that he or she can resume practice in compliance with acceptable and prevailing standards under the provisions of his or her license.

- (e) An individual or organization acting in good faith, and not in a willful and wanton manner, in complying with this Section by providing a report or other information to the Board, by assisting in the investigation or preparation of a report or information, by participating in proceedings of the Board, or by serving as a member of the Board, shall not be subject to criminal prosecution or civil damages as a result of such actions.
- (f) Members of the Board and the Disciplinary Board shall be indemnified by the State for any actions occurring within the scope of services on the Disciplinary Board or Board, done in good faith and not willful and wanton in nature. The Attorney General shall defend all such actions unless he or she determines either that there would be a conflict of interest in such representation or that the actions complained of were not in good faith or were willful and wanton.

If the Attorney General declines representation, the member has the right to employ counsel of his or her choice, whose fees shall be provided by the State, after approval by the Attorney General, unless there is a determination by a court that the member's actions were not in good faith or were

- 1 willful and wanton.
- 2 The member must notify the Attorney General within 7 days
- 3 after receipt of notice of the initiation of any action
- 4 involving services of the Disciplinary Board. Failure to so
- 5 notify the Attorney General constitutes an absolute waiver of
- 6 the right to a defense and indemnification.
- 7 The Attorney General shall determine, within 7 days after
- receiving such notice, whether he or she will undertake to 8
- 9 represent the member.
- 10 (Source: P.A. 101-363, eff. 8-9-19; 102-558, eff. 8-20-21.)
- 11 Section 99. Effective date. This Act takes effect upon
- 12 becoming law.".